

**HAWAII STATE ETHICS COMMISSION**

1001 Bishop Street, ASB Tower Suite 970
Honolulu, Hawaii 96813
P.O. Box 616, Honolulu, Hawaii 96809
Telephone: 587-0460 Fax: 587-0470
email: ethics@hawaiiethics.org

GIFTS DISCLOSURE STATEMENT

(This report covers the period from June 1 of the preceding calendar year through June 1 of this year and is due on June 30)

NAME: Bernadette A. Iwane

STATE POSITION: Insurance Licensing Clerk

STATE AGENCY: DCCA - Insurance Division

STATE TEL. NO.: (808) 586-2788

STATE MAILING ADDRESS: P. O. Box 3614
Honolulu, HI 96811-3614

1	DONOR	2	DESCRIPTION OF GIFT	3	DATE REC'D	4	GIFT VALUE	5	AGG. VALUE
	(NAIC) National Association of Insurance Commissioners		Air Fare, Food Transportation, Hotel and Conference Ed. & Training "The Electronic Age of Producer Licensing"		11/05 - 9/2005		\$1,360.51		

[illegible]

_____ Check here if you have attached additional sheets.

Bernadette A. Irvine
SIGNATURE